

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing

---

Small PHA Plan Update  
Annual Plan for Fiscal Year: 2002

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN  
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan  
Agency Identification**

**PHA Name:** Housing Authority of Cadiz

**PHA Number:** KY042

**PHA Fiscal Year Beginning: (mm/yyyy)** 04/2002

**PHA Plan Contact Information:**

Name: Donna J. McNichols

Phone: (270) 522-3916

TDD: 1-800-247-2510

Email (if available): cadizhousing@kih.net

**Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting:  
(select all that apply)**

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

**Display Locations For PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

**PHA Programs Administered:**

☐ Public Housing and Section 8      ☐ Section 8 Only      ☒ Public Housing Only

**Annual PHA Plan**  
**Fiscal Year 2002**  
[24 CFR Part 903.7]

**i. Table of Contents**

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

<b>Contents</b>	<b><u>Page #</u></b>
<b>Annual Plan</b>	
i. Executive Summary (optional)	2
ii. Annual Plan Information	1
iii. Table of Contents	1
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	2
2. Capital Improvement Needs	2
3. Demolition and Disposition	2-3
4. Homeownership: Voucher Homeownership Program	3
5. Crime and Safety: PHDEP Plan	4
6. Other Information:	
A. Resident Advisory Board Consultation Process	4
B. Statement of Consistency with Consolidated Plan	5
C. Criteria for Substantial Deviations and Significant Amendments	5-6
<b>Attachments</b>	
<input checked="" type="checkbox"/> Attachment A : Supporting Documents Available for Review	7-9
<input checked="" type="checkbox"/> Attachment B : Capital Fund Program Annual Statement	10-12
<input checked="" type="checkbox"/> Attachment C : Capital Fund Program 5 Year Action Plan	13-15
<input type="checkbox"/> Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement	
<input type="checkbox"/> Attachment D : Public Housing Drug Elimination Program (PHDEP) Plan	
<input checked="" type="checkbox"/> Attachment E : Resident Membership on PHA Board or Governing Body	16
<input checked="" type="checkbox"/> Attachment F : Membership of Resident Advisory Board or Boards	17
<input checked="" type="checkbox"/> Attachment G : Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	18
<input checked="" type="checkbox"/> Attachment H : Component 3, (6) Deconcentration and Income Mixing	19
<input checked="" type="checkbox"/> Attachment I : Component 10(B) Voluntary Conversion and Initial Assessments	20
<input checked="" type="checkbox"/> Other (List below, providing each attachment name) Performance & Evaluation Reports – 2001	ky042a01

## **ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

### **1. Summary of Policy or Program Changes for the Upcoming Year**

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

There are no policy and/or program changes for the upcoming year unless HUD mandates some changes within the year.

### **2. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$167,420

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

#### **(1) Capital Fund Program 5-Year Action Plan**

The Capital Fund Program 5-Year Action Plan is provided as Attachment C.

#### **(2) Capital Fund Program Annual Statement**

The Capital Fund Program Annual Statement is provided as Attachment B.

### **3. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to next component ; if "yes", complete one activity description for each development.)

## 2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>	
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>	
4. Date application approved, submitted, or received for admission: (DD/MM/YY)	
5. Number of units affected:	
6. Coverage of action (select all that apply) <input type="checkbox"/> Part of development <input type="checkbox"/> Total development	
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)	
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:	

## 4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFRpart 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

### B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources

- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

## **5. Safety and Crime Prevention: PHDEP Plan**

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ \_\_\_\_\_
- C. ☐ Yes ☒ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment \_\_\_\_\_

## **6. Other Information**

[24 CFR Part 903.7 9 (r)]

### **A. Resident Advisory Board (RAB) Recommendations and PHA Response**

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment G.
3. In what manner did the PHA address those comments? (select all that apply)
  - ☐ The PHA changed portions of the PHA Plan in response to comments  
A list of these changes is included
    - ☐ Yes ☐ No: below or
    - ☐ Yes ☐ No: at the end of the RAB Comments in Attachment \_\_\_\_\_.
  - ☒ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment G.
  - ☐ Other: (list below)

## B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here) Commonwealth of Kentucky
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
  - ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
  - ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
  - ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
  - ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
  - ☐ Other: (list below)
3. PHA Requests for support from the Consolidated Plan Agency
  - ☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

The Consolidated Plan of Kentucky and the PHA Plan concur in the objectives of preservation of housing units through modernization enabling the production of safe, decent and affordable housing for low income renter households through sound management efforts.

## C. Criteria for Substantial Deviation and Significant Amendments

### 1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

#### **A. Substantial Deviation from the 5-year Plan:**

The Housing Authority of Cadiz defines “substantial deviation” as a change in the capital budget and/or 5-Year Plan of 50% or more of non-emergency work items or any policy changes which would require resubmission of an updated Plan.

The Housing Authority of Cadiz made no substantial deviations from the 5-Year Plan Policy as outlined in the 2001 Agency Plan submitted to HUD.

#### **B. Significant Amendment or Modification to the Annual Plan:**

The Housing Authority of Cadiz will consider the following actions to be significant amendments or modifications:

- Changes to rent or admissions policies or organization of the waiting list with the exemption of HUD mandated changes in these policies.
- Addition of non-emergency work items in the amount of 50% of the capital budget (items not included in the current Annual Statement or 5-Year Action Plan).

The Housing Authority of Cadiz has not made significant amendments or modifications to the annual Plan except those that are adopted to reflect changes in HUD regulatory requirements.



## **Attachment A**

### **Supporting Documents Available for Review**

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> <li>· Baseline law enforcement services for public housing developments assisted under the PHDEP plan;</li> <li>· Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15);</li> <li>· Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities;</li> <li>· Coordination with other law enforcement efforts;</li> <li>· Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and</li> <li>· All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.</li> </ul>	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
X X	Other supporting documents (optional) (list individually; use as many lines as necessary) Deconcentration & Income Mixing Voluntary Conversion and Initial Assessments	(specify as needed)  Annual Plan – “H” Annual Plan – “I”

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary</b>					
<b>PHA Name:</b> <b>Housing Authority of Cadiz</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>KY36P042-501 (02)</b> Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2002</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	33,484			
4	1410 Administration	2,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	12,500			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	114,436			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	167,420			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

## Part II: Supporting Pages

[illegible]

**Annual Statement/Performance and Evaluation Report  
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)  
Part III: Implementation Schedule**

[illegible]

# Capital Fund Program Five-Year Action Plan

## Part I: Summary

PHA Name <b>Housing Authority of Cadiz</b>				<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2003 PHA FY:	Work Statement for Year 3 FFY Grant: 2004 PHA FY:	Work Statement for Year 4 FFY Grant: 2005 PHA FY:	Work Statement for Year 5 FFY Grant: 2006 PHA FY:
HA-Wide	Annual Statement	157,420	139,220	120,420	167,420
KY42-01		5,000	25,200	47,000	
KY42-03		5,000	3,000		
CFP Funds Listed for 5-year planning		167,420	167,420	167,420	167,420
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan <b>Part II: Supporting Pages—Work Activities</b>						
Activities for Year 1	Activities for Year : 2003 FFY Grant: PHA FY: 2003			Activities for Year: 2004 FFY Grant: PHA FY: 2004		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See						
Annual	HA-Wide	Administrative Salaries	33,484	HA-Wide	Administrative Salaries	33,484
Statement		Advertising/Printing	2,000		Advertising/Printing	2,000
		A/E Fees	10,000		A/E Fees	10,000
		Agency Plan Revision	3,000		Agency Plan Revisions	3,000
		Computer Upgrades	4,000		Computer Upgrades	5,000
		HVAC Upgrades	100,000		Sidewalks	10,000
		Landscaping	4,936		Water Heaters	15,000
		<i>Sub Total</i>	<i>157,420</i>		Entry Door locks	13,600
					Fencing	8,000
	KY42-01	Interior Painting	5,000		Interior Doors	21,500
					Landscaping	9,636
	KY42-03	Interior Painting	5,000		Siding Repair	8,000
					Railings	5,000
					<i>Sub Total</i>	<i>144,220</i>
				KY42-01	Porch Lights	5,200
					Raise Porches	15,000
					<i>Sub Total</i>	<i>25,200</i>
				KY42-03	Site Lighting	3,000
Total CFP Estimated Cost			\$167,420			\$167,420



Capital Fund Program Five-Year Action Plan					
Part II: Supporting Pages—Work Activities					
Activities for Year : 2005 FFY Grant: PHA FY: 2005			Activities for Year: 2006 FFY Grant: PHA FY: 2006		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
HA-Wide	Administrative Salaries	33,484	HA-Wide	Administrative Salaries	33,484
	Advertising/Printing	2,000		Advertising/Printing	2,000
	A/E Fees	10,000		A/E Fees	10,000
	Agency Plan Revision	3,000		Agency Plan Revision	3,000
	Computer Upgrades	4,000		Landscaping	8,000
	Office Equipment	5,000		Maintenance Equipment	10,000
	Parking Lot Resurfacing	4,500		Office Equipment	936
	Playground Equipment	10,000		Roofing	80,000
	Mower	15,000		Entry Doors	20,000
	Gutter Repair	10,000			
	Flooring	8,500			
	Shutters	13,936			
	<i>Sub Total</i>	<i>119,420</i>			
KY42-01	Tub Surrounds	15,000			
	Kitchen Upgrades	23,000			
	Bathroom Upgrades	10,000			
	<i>Sub Total</i>	<i>48,000</i>			
Total CFP Estimated Cost		\$167,420			\$167,420

## Required Attachment E: Resident Member on the PHA Governing Board

1. ☐ Yes ☒ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

B. How was the resident board member selected: (select one)?

☐ Elected

☐ Appointed

C. The term of appointment is (include the date term expires):

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis

☒ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

☐ Other (explain):

B. Date of next term expiration of a governing board member: March 31, 2002

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

Lyn Bailey, Mayor of Cadiz

## **Required Attachment F: Membership of the Resident Advisory Board or Boards**

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

### **All Tenants**

The Housing Authority of Cadiz had no response to a request for volunteers to be a part of a Resident Advisory Board; therefore, a letter has been sent to all residents naming all Housing Authority residents as participants in this Resident Advisory Board.

**Required Attachment G: Comments of Resident Advisory Board or Boards & Explanation of PHA Response:**

<b>Comments</b>	<b>PHA Response</b>
HVAC	Budgeted in 2003
More closet space	Dwelling units have no space to expand the closets
Washer hookups	There are laundry facilities on each site – PHA is working to improve the facilities’ hours
Better presence of police	There is a police substation on each site.
Outside dryer vent	There are laundry facilities on each site – PHA is working to improve the facilities’ hours – Some units are budgeted for dryer vents in 2002

**Required Attachment H: Component 3, (6) Deconcentration and Income Mixing**

- a. ☐ Yes ☒ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
- b. ☐ Yes ☐ No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

**Required Attachment I: Component 10(B) Voluntary Conversion  
And Initial Assessments**

- a. How many of the PHA's developments are subject to the Required Initial Assessments?

**Two**

- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)?

**None**

- c. How many Assessments were conducted for the PHA's covered developments?

**One**

- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

<b>Development Name</b>	<b>Number of Units</b>
None	

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments:

**The Housing Authority has completed the Assessments and has the documentation on file.**

# Annual Statement/Performance and Evaluation Report

## Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA Name: <b>Housing Authority of Cadiz</b>	Grant Type and Number Capital Fund Program Grant No: <b>KY36P042-501-01</b> Replacement Housing Factor Grant No:	Federal FY of Grant:  <b>2001</b>
--	--	---

☐ Original Annual Statement
 ☐ Reserve for Disasters/ Emergencies
 ☐ Revised Annual Statement (revision no: )
 ☒ Performance and Evaluation Report for Period Ending: 9-31-01
 ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	33,484			
4	1410 Administration	2,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	14,000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	56,200			
11	1465.1 Dwelling Equipment—Nonexpendable	1,000			
12	1470 Nondwelling Structures	60,736			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	167,420			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

## Part II: Supporting Pages

[illegible]



## Part III: Implementation Schedule

Capital Fund Program Tables Page 3